

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.		3. FEC Identification Number C C90005786
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800		
(c) City, State and ZIP Code Washington DC 20036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☒ 24-Hour Notice ☐ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M	M
0	8

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	8

 /

D	D
3	1

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES.....

2952.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Patrick Collins

08/31/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

Image# 10931219660
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 / 3

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Londonderry Town Clerk

Date

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Mailing Address

268 N Mommoth Rd

Amount

7.00

City

Londonderry

State

NH

Zip Code

03053

Purpose of Expenditure

Map Fee

Category/
Type

Office Sought:

☐ House

State: NH

☒ Senate

☐ Senate

District: _____

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Paul W. Hodes

Calendar Year-To-Date Per Election
for Office Sought

39490.28

Disbursement For:
2010

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Grassroots Unwired, LLC

Date

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Mailing Address

70 Fernwood Lane

Amount

1775.00

City

Roslyn

State

NY

Zip Code

11576

Purpose of Expenditure

Training Fee

Category/
Type

Office Sought:

☐ House

State: NH

☒ Senate

☐ Senate

District: _____

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Paul W. Hodes

Calendar Year-To-Date Per Election
for Office Sought

39490.28

Disbursement For:
2010

☒ Primary

☐ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Grassroots Unwired, LLC

Date

M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 1 0

Mailing Address

70 Fernwood Lane

Amount

1120.00

City

Roslyn

State

NY

Zip Code

11576

Purpose of Expenditure

Equipment Purchase

Category/
Type

Office Sought:

☐ House

State: NH

☒ Senate

☐ Senate

District: _____

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Rep. Paul W. Hodes

Calendar Year-To-Date Per Election
for Office Sought

39490.28

Disbursement For:
2010

☒ Primary

☐ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

2902.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE **3 / 3**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
John Burton

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	0

Mailing Address
4 Aetna Ct Apt 7

Amount

50.00

City
NashuaState
NHZip Code
03064-2869Purpose of Expenditure
Cell ServiceCategory/
Type

Office Sought:

☐

House

State: NH

Senate

☒

Senate

District: _____

☐

President

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Rep. Paul W. HodesCalendar Year-To-Date Per Election
for Office Sought

39490.28

Disbursement For:
2010☒

Primary

☐

General

☐ Other (specify) _____(a) **SUBTOTAL** of Itemized Independent Expenditures

50.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

2952.00